FOR OHIO EPA USE ONLY

APS APPL NO _____

DATE RECEIVED _____

OHIO ENVIRONMENTAL PROTECTION AGENCY
APPLICATION FOR A PERMIT TO OPERATE AN AIR CONTAMINANT SOURCE

Ohio Rubber Company
Facility Name

3911 Ben Hur Avenue
Facility Address

Willoughby | Lake | 44094
City | County | Zip

216 | 942-0500
Telephone Area | Number

Conrad G. Hornung
Person to Contact

3911 Ben Hur Avenue
Mailing Address

Willoughby | Lake Ohio | 44094
City | State | Zip

216 | 942-0500
Telephone Area | Number

02-43-16-0174
(Application No., if this is a renewal application)

Standard Industrial Classification Code

1. Complete and attach any of the following appendices most appropriate to the air contaminant source. In addition, a compliance time schedule form is to be attached when applicable. Check as appropriate the following:

___Appendix A, Process
___Appendix B, Fuel-Burning Equipment
___Appendix C, Incinerator
___Appendix D, Surface Coating or Printing Operation
_X_Appendix E, Storage Tank
___Appendix H, Gasoline Dispensing Facility
___Appendix J, Loading Rack at Bulk Gasoline Plant or Terminal
___Appendix K, Surface Coating Line or Printing Line
___Appendix L, Solvent Metal Cleaning
___Appendix M, Fugitive Dust Emission Sources
_____ (Specify Appendix No.)
___Appendix N, Rubber Tire Manufacturing
___Appendix O, Dry Cleaning Facility
___Appendix P, Synthesized Pharmaceutical Manufacturing
___Other Appendix _____
___Compliance Time Schedule

2. Description of Source (same as used on appendix): Xylene Bottoms Condensate Storage Tank

3. Your identification for Source (same as used on appendix): D-953 Xylene Bottoms Condensate Storage Tank

I, being the individual specified in Rule 3745-35-02(B) of the Ohio Administrative Code, hereby apply for a Permit to Operate the air contaminant source(s) described herein. As required, the following additional documents are submitted as part of this application (describe all attachments):

PAID
Amount #15.00 Date 10-01-85
Check # 161377 Date 9-27-85

RECEIVED
OCT 1 - 1985
OHIO EPA-N.E.D.O.

Authorized Signature*

Government Regulations Compliance Administrat
Title

September 1985
Date

*Pursuant to OAC Rule 3745-35-02(B) (Permit to Operate).

Operation of an air contaminant source without an effective permit to operate is prohibited pursuant to 3704.05 Ohio Revised Code.

EPA-3161

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Premise No.___/___/___/____
Source No.___/_____
Application No.____/_____

Ohio Rubber Company
(Facility Name)

APPENDIX E-2

INORGANIC MATERIAL STORAGE TANK OR
STORAGE TANK WITH CAPACITY LESS THAN 40,000 GALLONS

1. Tank identification: Name or number 1 (One) Date Installed Not Known (month/year)

2. Tank capacity: 6000 gallons

3. Tank shape: [x] Cylindrical [ ] Rectangular
[ ] Spherical [ ] Other, specify _____

4. Tank dimensions: Diameter 8' Height _____ Length 16' Width _____

5. Tank shell material: [x] Steel [ ] Aluminum [ ] Other, specify _____

6. Type of tank: [ ] External floating roof tank
[ ] Internal floating roof tank
[ ] Fixed roof tank
[ ] Vertical cylindrical tank
[x] Horizontal cylindrical tank
[ ] Pressure tank
[ ] Other, specify _____

7. Location of tank: [x] Outdoors [ ] Indoors [ ] Underground

8. Type of filling: [ ] Splash [x] Submerged [ ] Other, specify _____

9. If this tank is located outdoors and above ground, provide the paint color of the tank.

[ ] Aluminum (specular) [ ] Light gray [ ] White
[ ] Aluminum (diffuse) [ ] Medium gray [x] Other, specify Beige

Condition of paint: [x] Good [ ] Poor

10. If this tank is equipped with or vented to a vapor control system, complete (a) through (c) of this item.

a) Type of vapor control system N/A
Manufacturer Not Known Make or model Not Known
Date installed (month and year) Not Known

b) Date tank was equipped with or vented to vapor control system (month & year) N/A

c) Specify the rate of emission or percent control (by weight) for any pollutants being controlled: Not Known
(Attach calculations and test data to support response, unless previously submitted.)

*NOTE: Bottom of tank = 1 ft. off of ground

11. Complete the table below for any pressure or vacuum relief vent valve.

Type of Vent Valve	Pressure Setting	Vacuum Setting	If pressure relief is discharged to a vapor control, identify the vapor control.
N/A			

12. Operational Data (Complete (a) through (g) of this item for all materials stored or to be stored. Attach additional sheets, if necessary.)

a) Material Xylene Bottoms Trade Name Xylene Bottoms
Density: 7.45 lbs/gal or _____ °API Producer Ohio Rubber

b) Temperature of stored material: Average AMB °F and Maximum AMB °F
(If temperature is approximately outdoor ambient temperature, write "AMB".)

c) Vapor pressure of stored material (Complete i, ii or iii of this item. If vapor pressure is not known, write "unknown"):

i) Actual vapor pressure: _____ psia at average storage temperature
UNKNOWN _____ psia at maximum storage temperature

ii) Reid vapor pressure: Average _____ psi and minimum-maximum _____ - _____ psi
UNKNOWN

iii) If material stored is a gas or liquified gas, provide the pressure at which it is stored: N/A psi gage at _____ °F

d) Type of liquid organic material (If the material is an organic liquid other than a gasoline, fuel oil, kerosene, crude oil, lubricant or other petroleum liquid, answer the question below.)

Is it a photochemically reactive material? [ ] Yes [x] No

e) Type of waste material (If the material is a waste, answer the question below.)

Is it a hazardous waste? [x] Yes [ ] No
If yes, identify type (EPA hazardous waste number) D001

f)* Indicate the year (or 12-month period) for item (g): Average of 1981, 1982 totals

g)* Annual throughput of material: 12,512 gallons.

Completed by Conrad G. Hornung Date September 19, 1985
Anthony C. Bengal

* Total for all 4 storage tanks.

Under OAC 3745-31-04, These signatures shall constitute personal affirmation that all statements or assertions of fact made in the application are true and complete, comply fully with applicable state requirements, and shall subject the signatory to liability under applicable state laws forbidding false or misleading statements.

Conrad G. Horning 9/19/85

Authorized Signature (for facility) Date

Government Regulations Compliance Administrator

Title

3911 Ben Hur Avenue Willoughby, OH 44094

Address

For Wastewater Treatment Plants:

Signature of General Contractor or Agent Performing installation, if selected. Date

Company

Address

INDUSTRIAL USER INSPECTION FORM

Industry Name: Ohio Rubber SIC # 3069 - primary

Mailing Address: 3911 Bennett Ave, Willoughby 44094

Facility Address: same

Phone: (216) 942-0500

Date of Inspection: July 14, 1988

Company, City, OEPA representatives present: Conrad Hornung - O.R., Personal Mgr., Dan Powell - OEPA, Marty Helousky - OEPA, Sandy Lausek - OEPA

Name of Receiving POTW: Willoughby - Eastlake WWTP

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1. Brief Description of Process:

Process old rubber products into new products. Main product - floor mats for trucks & cars. Also make windshield wiper blades (rubber portions only).

2. Brief Description of Existing Treatment: Biological treatment system that may not be operation properly.

polymer → Aerated tank → oil separation → extended aeration → clarification

prior to this tank

Xylene is skimmed off the wastewater in a separate tank prior to the aerated tank.

Industrial User Inspection Form Cont.

3. Regulated by Categorical Standard: YES_____ NO ✓ CFR #______ Subpart ______

4. Compliance with Categorical Standard: YES n/A NO _____ If YES, note Item #7

5. If NO to Item #4, Comment: n/A

6. Block Diagram (Schematics of Process and Treatment Systems) - Comment: ___

7. Sampling Data

8. Spill Prevention Comments Tanks on the outside are diked. Have an updated SPCC plan. Working with Hazardous Waste personal - Rod Beals.

9. Additional Comments Potential direct discharge - Marty Nikowsky will be handling. Have asked for detailed floor plan indicating process discharges and destination, all sewers and manholes). Problem with discharge to sanitary sewer is pH.

Sk. 7/12